



Access to Women's Health Care America's Medical Liability Crisis Ob-Gyns Stories

1. Arizona

Melinda Sallard gave birth to her child on a desert highway while driving to the only remaining maternity ward in a 6,000 sq. mi. radius. Sallard had been receiving pre-natal care at a hospital which was just minutes from her home, but was forced to close its maternity ward months earlier because of skyrocketing medical liability costs. (NBC Nightly News with Tom Brokaw, May 8, 2002).

Copper Queen Community Hospital closed its maternity ward when all six family physicians able to deliver babies lost their liability insurance coverage. (Jim Dickson, CEO of Copper Queen Community Hospital, April 2003).

2. Arkansas

A 13-physician group of obstetricians at Fayetteville's FirstCare Family Doctors was forced to stop delivering babies after the group's primary insurer left the state and affordable insurance was not available. (Arkansas Business, Jan. 13, 2003).

3. Connecticut

An ob-gyn in Bridgeport retired in October 2002 because of soaring premiums, forcing the other four doctors in his group to perform more deliveries.

An obstetrician-gynecologist in Avon stopped doing obstetrics in August 2002, when her \$23,900 premium was set to rise to \$64,512.

Dr. Jodi Leopold was forced to quit her obstetrics practice when her medical liability premiums increase 72%. (The Hartford Courant, Nov. 17, 2002).

Ob-gyn Dr. Michael Morosky has left his 19-year practice after a \$30,000 increase in his medical liability insurance premiums. (New York Times, March 23, 2003).

4. Florida

A Tallahassee doctor's liability insurance rates rose 30%, with a 50% decrease in coverage. In his practice of 8, 3 doctors are quitting obstetrics. The ob-gyn commented that "recruiting [new ob-gyns] in Tallahassee is very difficult."

A West Palm Beach ob-gyn was forced to drop obstetrics to stay insured with an affordable premium.

A Bradenton ob-gyn's liability premiums increased by 59% in one year, with another 75% hike expected this year. He may have to drop obstetrics and his colleagues are on the brink of doing the same.

A Winter Park ob-gyn dropped his obstetrics practice after his premiums rose from \$48,000 to \$100,000. At that rate, he would have to work 6 months of the year just to pay his liability premiums. Instead, he, along with 4 other obstetricians, gave up ob altogether.

Lehigh Regional Medical Center closes maternity ward, citing medical malpractice insurance costs. (Associated Press, March 25, 2003).

Jackson Memorial Hospital's neonatal unit for high-risk babies is running consistently over capacity because the vast majority of obstetricians in Miami-Dade County is going without malpractice insurance and is avoiding difficult deliveries. (The Miami Herald, Feb. 14, 2003).

Despite having no malpractice claims or disciplinary actions on his record, Lakeland ob-gyn Dr. John Kaelber was forced to close his practice and leave the state when his premiums doubled. (Lakeland Ledger, Nov. 21, 2003).

Aventura Hospital in South Florida was forced to close its maternity ward, citing \$1,000 in insurance premiums for each delivery as the prime factor. Aventura is one of six maternity wards that closed between August and October 2002, forcing patients to drive to other counties and other facilities. (Miami Herald, Oct. 19, 2003).

A 45 member ob-gyn practice in Jacksonville serving 200,000 patients in Nassau, Duval, Clay, and St. John's counties stopped delivering babies and performing non-emergency gynecological surgery in May. (Florida Medical Association, March 2003).

Another Florida ob-gyn's medical liability insurance premiums increased 50% in one year. Moreover, the 50% increase in premium purchased 75% less in total liability coverage.

A West Palm Beach ob-gyn is quitting obstetrics in January 2004 after 27 years in practice. His son, who is studying obstetrics, is now considering internal medicine because of the effect of the medical liability crisis on ob-gyns.

5. Georgia

Dr. Randy Lentz cut back on volunteer and indigent obstetrics work when his medical liability premiums increased 300%. (Press-Sentinel, December 2002).

Dr. Edmund Wright of Fitzgerald was forced to stop performing Caesarian sections as a part of his family practice when his medical liability premiums quadrupled to \$80,000. It would have been \$110,000 if he had continued the surgical delivery procedure. (The Atlanta Journal-Constitution, Aug. 11, 2002).

6. Illinois

Dr. Andrew Roth has been practicing ob-gyn for 14 years and has never been sued. Dr. Roth sees 150 patients a week and performs roughly 200 deliveries a year, many complicated and high-risk. In January, Dr. Roth's premium increased 15%. This year, it will increase another 50% -- to around \$163,000 -- one of the best rates available even with his track record. Dr. Roth may have to change his practice completely -- drop obstetrics or leave his home state.

Another ob-gyn in a North Chicago suburb started out in a group practice where she paid \$42,000 in insurance premiums before switching to a solo practice where her insurance rates doubled to \$84,000. In 2003, her rates went up to \$105,000 with an expected rate of \$135,000 in 2004. Her rates have tripled even though she has never been sued. In order to continue practicing obstetrics, she downgraded to a part-time practice, which decreased her premiums to \$65,000. She has 2200 patients -- including entire families -- and has delivered 150-200 babies per year since 1996. She will likely give up obstetrics entirely in January 2004.

An Illinois ob-gyn practice group recently limited its high-risk obstetrics practice because the group's liability insurance rate has tripled in 2 years. This practice group formerly served a large number of the underserved population, but can no longer afford to see these patients and still cover the skyrocketing costs of the practice.

Another practice group is facing a 56% increase in its insurance premiums in 2004 -- at a cost of \$320,000 for 3 ob-gyns and 2 nurse practitioners. All of the ob-gyns in this group are in their early 40s, the primes of their careers, yet they are strongly considering dropping obstetrics entirely. Nearly 500 pregnant women would be forced to find another obstetrician.

Memorial Hospital in Belleville, IL lost 3 obstetricians last year and has not been able to replace them. Another 2 ob-gyns might leave because their liability insurance was not renewed. The hospital has not been able to recruit an ob-gyn in 2 years.

A Chicago-area ob-gyn is forced to study to obtain a pharmacist's license and give up his medical career to avoid further escalations of his liability insurance premiums, which had risen to \$115,000. (Chicago Sun Times, Nov. 11, 2002).

Harry Maier, Memorial Hospital chief executive, says, "We have lost three ob-gyn physicians in the last six months only because of malpractice [rates]. I would say we are going to see another five to seven leave or limit their practice if this is not resolved." (Chicago Tribune, Feb. 16, 2003).

Dr. Stephanie Skelly, an ob-gyn in Belleville, is considering a move to her home state, Louisiana, where liability costs are about half that of Illinois. The combined premium for Skelly and her partner, Dr. John Hucker, doubled last year to \$200,000 from \$100,000. They took out a loan to pay a one-time \$250,000 for tail coverage. (St. Louis Post-Dispatch, Oct. 6, 2002).

An Illinois reproductive endocrinologist experienced a 30% increase in her medical liability insurance premiums with no claims. As a result, her practice accepts only one HMO and limits the patient workload to keep her premiums at an affordable level.

An Illinois doctor quit obstetrics in July because his group could not get a medical liability insurance quote under \$195,000.

An Illinois doctor of 24 years shut down his private practice in July because of an exorbitant malpractice premium of \$146,000.

7. Iowa

After more than 19 years as an obstetrician, Dr. Dan Bohle delivered his final baby last year. "A lot of times there is a two-year statute of limitations," Bohle said, "but for [obstetrics] it can be 18 years plus two years." (Telegraph Herald, July 14, 2003.)

Dr. Michael McCoy stated that the growing medical liability crisis in Iowa and the low reimbursement rates has made it extremely difficult for private hospitals to recruit ob-gyns. The liability insurance companies that are left in Iowa are not writing new policies for single practitioners because of the liability crisis.

Dr. Sanford Markham is a member of the ob-gyn department at the University of Iowa Hospital, which serves as a teaching hospital. The ob-gyn department realized a nearly 500% increase in their required contribution to the self-insurance program this year – from \$66K in 2002 to \$320K in 2003, the equivalent of the starting salaries for 2 new ob-gyns. The hospital had plans to hire at least one new ob-gyn, however the increase in their insurance premiums contribution has made that impossible. The new ob-gyn would have been based within the hospital's Continuity of Care Program which serves mostly indigent patients.

8. Kansas

A Kansas ob-gyn has been forced out of business after 23 years of practice, when one of his insurance companies went bankrupt and he could not find a replacement carrier.

9. Kentucky

One obstetrician in a rural Kentucky town decided to leave the state when he received notice that his insurance premium would double. He and his partner delivered 500 babies per year.

Dr. James Graham, who has been practicing obstetrics and gynecology in Kentucky for 18 years, has suffered a severe premium increase from \$22,000 three years ago to \$44,000 two years ago and \$88,000 last year. (Business First, July 5, 2002).

A University of Kentucky College of Medicine training program for new family doctors was in jeopardy last year because the clinic in which they work had lost its medical liability insurance coverage. The training includes obstetrics, and dozens of pregnant women are counting on doctors in the same clinic to deliver their babies this year. (The Courier-Journal, Jun. 27, 2002).

10. Maryland

A Maryland ob-gyn recently moved from New York after 5 years of practice to escape the rising premium costs. Currently in rural Maryland, her premiums are \$120,000. Recently, 8 ob-gyns dropped obstetrics leaving only 2 other ob-gyns in her area.

Dr. Joseph Cutchin Jr., an ob-gyn who delivered more than 430 babies in 2001, literally cannot afford to deliver any more babies due to an increase in his insurance premiums from \$44,000 to \$155,000. As a result, he leaves 188 pregnant women who were under his care searching for a new ob-gyn. (Baltimore Sun, Nov. 1, 2002).

11. Massachusetts

After experiencing a 100% increase in liability premiums, a Springfield obstetrician has stopped delivering babies, and says that 25% of ob-gyns in the Springfield area are leaving the area or dropping obstetrics from their practice.

12. Mississippi

In only three years, a Mississippi obstetrician's medical liability insurance premium has increased from \$30,000 to \$197,000. Only 43 years old, in the prime of his career, he can no longer provide high-risk care and has to turn patients away. "I never imagined that all of the years and sacrifice and service would end up like this."

Ambur Peterson was forced to drive 100 miles to Tennessee to deliver her baby because her obstetrician had to stop delivering babies after losing his liability coverage just three weeks before the baby was due. "Essentially, I've lost my job," said Dr. Mark Blackwood, Ambur's former OB. (The Sun Herald, July 11, 2002).

A Grenada, Mississippi ob-gyn stopped taking any obstetric patients with a due date after June 15, 2003, leaving two obstetricians to deliver approximately 700 babies per year.

Another Mississippi ob-gyn group's insurance increased from \$50,000 to \$180,000 in the past year. The added expense has cancelled the practice's plan to improve its technology, including a new fetal monitor.

13. Missouri

A Missouri doctor's practice incurred astronomical medical liability insurance costs, paying \$600,000 for coverage this year, an increase from \$150,000 last year. In addition, after paying \$500,000 for tail coverage, the coverage company went out of business and he lost the benefit. He has considered dropping obstetrics.

Dr. Al Elbendary, a gynecological oncologist, left a group practice and eliminated a rural outreach clinic because of rising professional medical liability premiums. "Women with gynecologic cancers in Ste. Genevieve, Carbondale and Chester now have to drive over a hundred miles to see a gynecologic oncologist and receive the care they deserve," said Elbendary. (St. Louis Post-Dispatch, Oct. 31, 2002).

An ob-gyn in St. Ann was forced to close his practice last year because of medical liability costs that rose 100%. The practice had delivered about 400 babies a year. (St. Louis Business Journal, Sept. 16, 2002).

A Missouri doctor who has been in private practice for 3 years experienced a 400% increase in his liability premiums over the past 3 years and received a quote for \$108,000 in 2004.

14. Nevada

Bonnie Seubert of Las Vegas, who has a history of complicated pregnancies, lost two obstetricians in one year when they could no longer obtain medical liability coverage. She lost the first one during a complicated pregnancy, and the second just days before she was scheduled to undergo a full hysterectomy. (Statement at a Las Vegas rally and news conference sponsored by CARH, May 6, 2003).

It took Elizabeth Gromny six years and countless infertility treatments to conceive her first child. But the day she called to make her first appointment with her obstetrician, the doctor had just capped the

number of deliveries she would perform because her insurance bill would "shoot up" if she exceeded a certain number of births. Gromny was turned away from other obstetricians all over Las Vegas who faced similar limits. (Time, Sept. 16, 2002).

Nancy Allen waited six months to have suspicious lumps removed from her uterus and ovaries. She would have waited longer, but went to her doctor's office and refused to leave until her hysterectomy was scheduled. (Las Vegas Review-Journal, Nov. 5, 2002).

Nicole Lytle told legislators that it took her 60 days to find an obstetrician to deliver her baby earlier this year. "Every single ob-gyn I called turned me away," she said. Nicole was so frustrated that she began talking about her plight during her morning radio show. "Pretty soon women were calling me and crying, saying they couldn't find doctors either." (Las Vegas Review-Journal, March 5, 2003).

Ruth Valentine was forced to leave Las Vegas to find an ob-gyn to care for her after having had to call more than 50 doctors.

Carolyn Faris, with the help of her former obstetrician, called more than 60 Las Vegas-area doctors to find someone to deliver her baby, and only then did she eventually find one because she began experiencing complications. (Las Vegas Review-Journal, Jan. 10, 2003).

Dr. Cheryl Edwards was forced to leave Las Vegas when her premiums more than quadrupled. She now lives in California, a state with medical liability reforms already in place. (Keep our Doctors in Nevada, January 2002).

Dr. Shelby Wilbourn, who left Nevada for Maine to escape high medical liability premiums wonders who will deliver the 500 babies born each week in Las Vegas and if there will be any ob-gyns to take emergency calls. (Associated Press, Feb. 12, 2003).

Mark F. Severino, an infertility specialist, stopped practicing in Las Vegas in June because his medical malpractice insurance ran out. Severino and his family moved to Green Bay, Wisconsin. "I was in practice since 1985, and I never had a claim." (Journal-Sentinel, April 20, 2003).

Dr. Guy Torres will have no choice but to stop delivering babies this fall when his insurance policy runs out. He will face a new annual premium of more than \$200,000. (USA Today, April 8, 2003).

Dr. Darren Housel was forced to relocate his ob-gyn practice, which delivers 200 babies a year, from Las Vegas to Utah when his premiums skyrocketed to over \$100,000 a year. (Las Vegas Review-Journal, Aug. 29, 2002).

Dr. Warren Volker, chairman of obstetrics at Summerlin Hospital Medical Center, indicated that the hospital is experiencing tremendous difficulty recruiting new obstetricians.

A Nevada ob-gyn has limited his obstetrics care because current insurance plan, which increased from \$43,000 to \$98,000 in one year, limits him to 240 deliveries a year. As a result, he is forced to turn away 20 women a day seeking care.

15. New Jersey

In July 2002, the Childbirth Center in Englewood closed due to rising liability insurance rates for obstetric services. The Center lost its coverage when the Princeton Insurance Company pulled out and obtaining insurance through a new company would have cost the Childbirth Center \$325,000 per year compared to \$30,000 with Princeton Insurance Company.

16. New York

In light of the recent liability premium increases, a New York ob-gyn is contemplating moving to Tennessee. His premiums have increased to \$140,000, up from \$105,000 since last year. He follows in the footsteps of his grandfather and uncle and would never have considered a move last year. After 20 years in practice, he would hate to end the family tradition of providing care to New York's women.

The Elizabeth Seton Childbearing Center, the famed natural-childbirth center whose midwives have helped the rich and famous deliver babies, announced that it will be shutting down in September 2003 due to skyrocketing insurance costs. The center delivers about 420 babies annually on-site. (New York Post, Aug. 12, 2003).

Long Island ob-gyn Juliana Opatich delivered babies for almost 20 years, but on July 1, 2002, she gave up that part of her practice. She said rising insurance costs were the final reason for her departure from obstetrics.

Five New York gynecologic-oncologists suffering from an increase in medical liability insurance premiums quit the practice. Now, there is only one gynecologic-oncologist left within 110 miles to provide care. The only other option for patients is to travel a great distance or take a ferry to Connecticut.

17. North Carolina

A North Carolina ob-gyn left his practice of 15 years after a more than 250% increase in medical liability premiums.

Another North Carolina ob-gyn's premiums increased from \$40,000 to \$150,000. Within the last 18 months he and 2 doctors have left his area.

Dr. Mary-Emma Beres stopped delivering babies after her premiums increased from \$17,500 to \$60,000, leaving only one doctor in all of Allegheny County who can perform Caesarean sections. (Raleigh News & Observer, March 30, 2003).

Martin Palmeri, a 3rd year medical student at East Carolina, switched from specializing in ob-gyn to Radiology due to the high cost of liability insurance and the risk of getting sued in his state. (East Carolina University, June 2003).

Dr. John Schmitt, an obstetrician, left his private practice in Raleigh last year to take a position with UVA's medical school after his annual liability insurance costs increased. Former patient Laurie Peel said, "When you are a woman, you try to find a gynecologist who will take you through lots of things in life. I suffered a miscarriage. You develop a relationship with your doctor. To lose someone like that is very hard." (Charlotte Observer, July 25, 2002).

An obstetrician at Women's Care, P.A., the largest independent ob-gyn physician group in North Carolina, was forced to stop delivering babies this year due to the 30% increase in medical liability insurance premiums. (North Carolina Medical Society, June 12, 2003).

18. Ohio

The chairman of an ob-gyn residency department in Ohio is unable to train future ob-gyns. Due to high liability premiums, it is difficult to find faculty to teach obstetrics residents. He encourages his students to still choose obstetrics as a profession, with a warning to "pick the right state."

The maternity care clinic at Union Hospital in Dover shut its doors because three out of the five physicians participating in the clinic "have stopped or will stop delivering babies due to increased malpractice insurance costs," according to an October 2002 article in The Times Reporter.

Dr. Walid Kassem stopped delivering babies in 2001 when his liability premiums increased more than 100%. "I can't afford to deliver babies," he said. "I felt guilty to quit. I felt like I'd lost a part of me." (Cox News Service, Aug. 16, 2002).

Dr. Brian Batchelder, a family practitioner who delivered babies for 18 years, was forced to quit that part of his practice after his liability costs more than doubled. He was the only physician in Morrow County delivering babies and providing obstetrical care. "It's one thing to stop voluntarily; it's quite another having it forced upon you," he said. (Mansfield News Journal, March 15, 2003).

Shelly Holt was forced to find a new ob-gyn just four weeks before her due date. Two of Ms. Holt's previous obstetricians had since stopped delivering babies because of the increase in liability insurance premiums. (Ohio News-Messenger, March 5, 2003).

Dr. David Burkons and his two partners at University Suburban Gynecology, Inc. in South Euclid could not afford to pay a combined \$360,000 for a year of malpractice coverage. As a result, they were forced to stop delivering babies and limited their practice to gynecology. (The Plain Dealer, Oct. 20, 2002).

Dr. Frank Komorowski of Bellevue stopped delivering babies after 20 years when he found out the day after Christmas last year that his liability insurance was tripling to more than \$180,000. Komorowski, the only obstetrician in Bellevue, figured it would end up costing him nearly 11 months of his salary to pay the premium increase in addition to taxes and other expenses. (The News-Messenger, March 5, 2003).

19. Oregon

The only surgeon in Reedsport left last year because of the medical liability crisis. No family practitioners in Reedsport are trained to do Caesarean sections. (The Sunday Oregonian, March 2003).

Roseburg Women's Healthcare in southern Oregon closed. The area, with a population of 20,000, was left with only 3 ob-gyns willing to deliver babies, down from eight. Area residents now have to travel more than an hour for obstetrical care. (The Business Journal of Portland, June 21, 2002).

20. Pennsylvania

On June 20, 2002, Mercy Hospital announced it would stop delivering babies as of August 23, 2002. Rising cost of malpractice insurance to cover obstetrics factored into the decision.

On April 24, 2002, Methodist Hospital in South Philadelphia announced that it would stop delivering babies due to the rising costs of medical liability insurance. The labor and delivery ward closed June 30, leaving that area of the city without a maternity ward. Methodist Hospital has been delivering babies since being founded in 1892.

80% of medical students who come to the state ultimately choose to practice elsewhere, according to the Pennsylvania Medical Society.

Pennsylvania ranks last in the percentage of physicians under the age of 35, despite harboring eight medical schools within its borders. In high-risk specialties, historically Pennsylvania has always retained 40% of the residents from medical schools; it now retains 14%, in large part because new doctors are choosing to practice elsewhere given Pennsylvania's high liability costs and litigious environment. (Northeast Pennsylvania Business Journal, April 1, 2003).

A Pennsylvania ob-gyn who has been in practice for 9 years recently quit obstetrics because of inadequate reimbursements and a 200% increase in malpractice premiums.

A young ob-Gyn who had planned on practicing in Pennsylvania for her entire career was forced to move to Indiana to get away from the medical liability disaster in Pennsylvania. Her insurance premiums in Indiana, which has enacted medical liability reform, including a cap on damages, are nearly \$100,000 less.

21. South Carolina

Only 4 doctors now deliver babies in Oconee County, down from 11 in 2001. (South Carolina Medical Association, Feb. 21, 2003).

Dr. Allan R. MacDonald was forced to discontinue his obstetrics practice when his malpractice insurance premiums rose 400% without notice. His patients had only two days to find another doctor. (Greenville News, Nov. 13, 2002).

A 10-physician ob-gyn group in Columbia had to take out a \$400,000 loan this year to continue to provide obstetric services and pay its liability premiums. (South Carolina Medical Association, Feb. 21, 2003).

A family practitioner in Seneca who has practiced for 21 years saw his liability rates go up 400% in one year. Now, only one doctor in his five-partner practice is currently practicing obstetrics. (South Carolina Medical Association, Feb. 21, 2003).

Another family practice group in Seneca was forced to drop obstetric coverage for four of their six physicians because of skyrocketing premiums. There are currently a total of four physicians in Seneca treating pregnant women. (South Carolina Medical Association, Feb. 21, 2003).

A South Carolina ob-gyn will most likely leave the state because of the skyrocketing medical liability premiums. Already, she has limited her practice by not taking Medicare and Medicaid for her gyn patients.

22. Tennessee

A Tennessee high-risk ob-gyn's liability insurance premium increased to \$70,000 forcing him to reduce the number of deliveries by more than 50% and limit the types of insurance accepted by his practice.

23. Texas

An Austin doctor has experienced a 300% increase in liability premiums. She, along with several other Austin ob-gyns, decided to drop obstetrics.

The Abilene Reporter News reported on October 13, 2002, that the obstetrics unit at Spring Branch Medical Center is set to close December 20, 2002. The hospital's \$600,000 premium for labor and delivery liability was set to increase by 67% in 2003. In 2001, 1,003 babies were born at Spring Branch Medical Center.

The Conroe Family Practice Center was forced to shut its door for two days in July 2002 when its malpractice insurance was abruptly canceled by an insurer no longer willing to cover residents who deliver babies. Roughly 120 patients were turned away each day at the clinic before it found insurance at premiums roughly \$100,000 higher than budgeted for, said Dr. Charles Alvin Jones, director of the facility's residency program. (Houston Chronicle, Aug. 3, 2002).

Dr. Maryann Prewitt was forced to stop delivering babies at Presbyterian Hospital in Plano due to skyrocketing liability insurance costs. (Dallas Business Journal, Oct. 7, 2002).

A pregnant woman showed up in Dr. Lloyd Van Winkle's Castroville office in South Texas, less than 10 minutes from delivery. Her family doctor in Uvalde was forced to stop delivering babies recently, citing malpractice concerns. The woman was trying to drive 80 miles to her San Antonio doctor and hospital. (Fort Worth Star-Telegram, Jan. 26, 2003).

24. Utah

A Utah doctor described the situation in Utah as critical – the State ranks 49th in the Nation for adequacy of prenatal care and has one of the highest birth rates. About 12% of ob-gyns have dropped obstetrics, and another 25% say they will stop within the next 5 years. 60% of the ob-gyns limit or do not accept Medicaid. Her liability premium has increased from \$40,000-\$72,000. In 2003 she would have to deliver 256 babies just to pay overhead, including liability premiums, although she only provided obstetric services for 162 patients last year.

At the University of Utah this past year, only 2 out of 100 medical school graduates chose obstetrics for their residency programs. In 2002, none of the graduates chose obstetrics. In prior years, 6 to 10 graduates entered obstetrics.

25. Virginia

An ob-gyn in rural southwestern Virginia recently left the state when his liability premium went from \$19,000 to \$56,000 in just two years.

26. Washington

A Washington State ob-gyn, a solo practitioner, has never been sued in nearly 25 years of providing ob-gyn care. In addition, he taught clinical ob-gyn to medical students at the University of Washington. In 2002, because of rising insurance costs he had to give up obstetrics, which also forced

him to stop teaching at the university, which was the part of his career that he truly enjoyed. Because of the hostile and litigious environment and the rising liability insurance costs, he has urged family members and his students to consider careers other than medicine or specializing in ob-gyn.

At Sound Women's Care, director Dr. Gordon Hunter said the group's six obstetrician-gynecologists say their medical liability premiums rose \$168,000, or 50 percent, over the past two years. Almost half of the clinic's patients were in the state's low-paying program. In May, Dr. Hunter will stop delivering babies and will provide only gynecological care.

The medical malpractice insurance premiums for Seattle ob-gyn Gillian Esser went from \$20,000 in 1999 to \$108,000 this year – a 400% increase. Five of her colleagues have been forced to quit practice altogether or moved to states with comprehensive medical liability reforms already in place (California and Wisconsin, respectively).

Nineteen family physicians at the Swedish/Providence Medical Group have stopped delivering babies this year because of unaffordable medical liability costs. Eight family physicians at the Rockwood Clinic in Spokane have stopped delivering babies as well. (News Tribune, June 29, 2003).

In Mount Vernon, six of nine ob-gyns have stopped delivering babies; in Tacoma, 10 of 20 ob-gyns have been forced to stop. (KOMO-TV, May 29, 2003).

Dr. Robert Pringle, who runs the North Cascade Women's Clinic in Mount Vernon, said he's seen his yearly liability insurance bill grow to \$58,000. If the price continues to rise, Dr. Pringle and his partners will be forced to stop delivering babies. (The Olympian, Oct. 12, 2002).

27. West Virginia

An entire hospital may cross the border into Virginia in order to continue in operation. Bluefield Regional Medical Center doctors voted late in October 2002, to begin plans to move certain services to Bluefield, VA.

The West Virginia State Medical Society reports that the federal government officially designates a majority of the state as medically underserved because of a shortage of health professionals. Losing even one ob-gyn would have a devastating impact on small communities.

28. Wyoming

In Newcastle, three family physicians have been forced to discontinue providing obstetrical care to their patients after their liability costs skyrocketed. Now women must drive between 30-90 miles to find a physician to delivery their babies. (BestWire, July 18, 2003).

Wyoming ob-gyns and family physicians who deliver babies pay at least \$20,000 to \$30,000 more than their counterparts in Colorado, which has a \$250,000 cap on non-economic damages. (BestWire, July 18, 2003).

Dr. Amy Trelease-Bell was forced to limit the number of babies each doctor in her practice delivers to 30 per year to avoid astronomical increases in her medical liability coverage. (Wyoming Tribune-Eagle, Dec. 9, 2002).

Dr. Willard Wood, the only ob-gyn serving three Wyoming counties for the past quarter-century, stopped delivering babies earlier this year after his medical liability costs tripled to \$116,000. He had delivered more than 1,000 babies, including the entire starting rosters of 2 local high school basketball teams. (Washington Post, Feb. 3, 2003).

Another Wyoming ob-gyn has experienced a more than 50% increase in premiums even though no claims have ever been filed against her.